



MAJOR SOURCE OPERATING PERMIT APPLICATION INCINERATION

1. FACILITY NAME:		2. INCINERATOR IDENTIFICATION:	
3. INCINERATOR DESCRIPTION:			
4. STACK ID OR FLOW DIAGRAM POINT IDENTIFICATION (S) :			
IF THIS INCINERATOR IS CONTROLLED FOR COMPLIANCE UTILIZING ADD-ON CONTROL EQUIPMENT, ATTACH AN APPROPRIATE AIR POLLUTION CONTROL SYSTEM FORM.			
5. TYPE OF INCINERATOR (CHECK ONE) : <div style="display: flex; justify-content: space-between;"> _____ SINGLE CHAMBER _____ CONTROLLED AIR _____ MULTIPLE CHAMBER _____ FIXED HEARTH </div> <div style="display: flex; justify-content: space-between;"> _____ STEPPED HEARTH _____ ROTARY KILN _____ OTHER - SPECIFY: _____ </div>			
6. YEAR OF CONSTRUCTION OR LAST MODIFICATION:			
7. DESCRIBE ALL TYPES OF MATERIALS TO BE BURNED IN THIS UNIT. (DECLARE MATERIALS STATED IN 1200-3-31-.02(6) OF THE TENNESSEE AIR POLLUTION CONTROL REGULATIONS AND IDENTIFY)			
TYPES OF MATERIALS TO BE BURNED		WEIGHT PERCENTAGE OF TOTAL CHARGE	HEATING VALUE
8. TYPE OF INCINERATOR CHARGING: <div style="display: flex; justify-content: space-between;"> A. _____ BATCH FEED _____ CONTINUOUS FEED B. MAXIMUM CHARGING RATE: _____ LBS/HR. </div> <div style="display: flex; justify-content: space-between;"> C. WASTE CHARGING METHOD: _____ </div>			
9. TYPE OF CHAMBER: COMBUSTION INFORMATION	DESIGN TEMPERATURE (°F)	SIZE (MILLION BTU/HR)	BURNER FUELS
PRIMARY CHAMBER			
SECONDARY CHAMBER			
10. RESIDENCE TIME OF GAS IN THE SECONDARY CHAMBER:			
11. IF THIS INCINERATOR IS EQUIPPED WITH A HEAT RECOVERY SYSTEM, WHAT IS THE PROJECTED ENERGY PRODUCTION RATE? (i.e. pounds of steam per hour)			
12. NORMAL OPERATING SCHEDULE: _____ HRS/DAY _____ DAYS/WK _____ DAYS/YR			
IF THIS INCINERATOR'S EMISSIONS AND/OR OPERATIONS ARE MONITORED FOR COMPLIANCE, PLEASE ATTACH THE APPROPRIATE COMPLIANCE DEMONSTRATION FORM.			
13. LOCATION OF THIS INCINERATOR IN UTM COORDINATES: UTM VERTICAL: _____ UTM HORIZONTAL: _____			
14. IF THIS INCINERATOR IS REGULATED UNDER RCRA, PLEASE PROVIDE THE PERMIT NUMBER (THE WASTE MATERIALS BURNED IN RCRA PERMITTED INCINERATOR (S) ARE NOT REQUIRED TO BE INCLUDED IN ITEM 7 ABOVE).			
15. PAGE NUMBER :		REVISION NUMBER:	DATE OF REVISION: